

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Mayday PAC

ADDRESS (number and street)

PO Box 75357

Check if different
than previously
reported. (ACC)

Washington

DC

20013

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00562587

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 20 2016

through

M M M / D D D / Y Y Y Y Y Y
11 28 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Singer, Benjamin, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Singer, Benjamin, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 08 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Mayday PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		20		2016

To:

M M	/	D D	/	Y Y Y Y Y
11		28		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Mayday PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1444.00	85001.02
(ii) Unitemized	3976.07	101259.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5420.07	186260.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5420.07	186260.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	18011.19
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	39.00	5039.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5459.07	209310.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5459.07	209310.83

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	34288.87	421844.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	34288.87	421844.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	18153.99	31778.59
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	135.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	135.00
29. Other Disbursements (Including Non-Federal Donations).....	1397.82	1397.82
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	53840.68	455156.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53840.68	455156.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5420.07	186260.64
34. Total Contribution Refunds (from Line 28(d))	0.00	135.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5420.07	186125.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	34288.87	421844.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	18011.19
38. Net Operating Expenditures (subtract Line 37 from Line 36)	34288.87	403833.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Balistreri, John, , ,

Mailing Address 5 E 22nd St
Apt 23B

City
New York

State
NY

Zip Code
10010-5329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Clinical Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : VNVZMEY30Z3

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Balistreri, John, , ,

Mailing Address 5 E 22nd St
Apt 23B

City
New York

State
NY

Zip Code
10010-5329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Clinical Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016

Transaction ID : VNVZMEZRYB7

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Benham, Alice, J, ,

Mailing Address 217 Water St

City
Richmond

State
CA

Zip Code
94801-3838

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Holy Names University

Occupation (for Individual)

Nurse Practitioner/Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2016

Transaction ID : VNVZMF07242

Amount of Each Receipt this Period

27.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

107.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Benham, Alice, J.,

Mailing Address 217 Water St

City
Richmond

State
CA

Zip Code
94801-3838

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Holy Names University

Occupation (for Individual)
Nurse Practitioner/Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

11 / 14 / 2016

Transaction ID : VNVZMEZH137

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Blankenbicker, Richard, A.,

Mailing Address 2404 Colston Dr
Apt 201

City
Silver Spring

State
MD

Zip Code
20910-2526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smithsonian Institution

Occupation (for Individual)
Education Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 02 / 2016

Transaction ID : VNVZMF070X4

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Blankenbicker, Richard, A.,

Mailing Address 2404 Colston Dr
Apt 201

City
Silver Spring

State
MD

Zip Code
20910-2526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smithsonian Institution

Occupation (for Individual)
Education Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 09 / 2016

Transaction ID : VNVZMF070D8

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bookman, Richard, , ,

Mailing Address 5907 Riviera Dr

City
Coral Gables

State
FL

Zip Code
33146-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Miami

Occupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMEYR7T5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Braddlee, Dr., , ,

Mailing Address 2451 Midtown Ave
Apt 201

City
Alexandria

State
VA

Zip Code
22303-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northern Virginia Community College

Occupation (for Individual)
Dean

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMEYR893

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chambers, Wick, , ,

Mailing Address 224 Edgehill Rd

City
Hamden

State
CT

Zip Code
06517-4014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winnick Ruben Hoffnung

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMEYR7N5

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

200.00

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cohen, Mark, , ,

Mailing Address 6228 Coldstream Dr

City
Highland Heights

State
OH

Zip Code
44143-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UHCMC

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMEYR828

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cohen, Mark, , ,

Mailing Address 6228 Coldstream Dr

City
Highland Heights

State
OH

Zip Code
44143-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UHCMC

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2016

Transaction ID : VNVZMEZPTP2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coleman, James, , ,

Mailing Address 4547 N Kilbourn Ave

City
Chicago

State
IL

Zip Code
60630-4119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Metro Group

Occupation (for Individual)
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2016

Transaction ID : VNVZMEZPB39

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coombs, Sharon, , ,

Mailing Address 3400 Owasso St

City
Saint Paul

State
MN

Zip Code
55126-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Child Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : VNVZMF071Z3

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coombs, Sharon, , ,

Mailing Address 3400 Owasso St

City
Saint Paul

State
MN

Zip Code
55126-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Child Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : VNVZMEY30S6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coombs, Sharon, , ,

Mailing Address 3400 Owasso St

City
Saint Paul

State
MN

Zip Code
55126-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Child Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2016

Transaction ID : VNVZMF071K8

Amount of Each Receipt this Period

8.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Crosman, Robert, , ,

Mailing Address 2806 Regent St
Apt F

City
Berkeley

State
CA

Zip Code
94705-2100

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 02 / 2016

Transaction ID : VNVZMF070W6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Curtis, Torrey, , ,

Mailing Address 1222 Grandview Dr

City

Weatherford

State

OK

Zip Code

73096-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 27 / 2016

Transaction ID : VNVZMEY3151

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Curtis, Torrey, , ,

Mailing Address 1222 Grandview Dr

City

Weatherford

State

OK

Zip Code

73096-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2016

Transaction ID : VNVZMEZRYC5

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Diggle, Roger, , ,

Mailing Address 2126 Center Ave

City
MadisonState
WIZip Code
53704-5623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Urban Land InterestsOccupation (for Individual)
Refrigeration Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2016

Transaction ID : VNVZMEZeqB3

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Forste, Paul, , ,

Mailing Address 126 Oakdene Ave

City
TeaneckState
NJZip Code
07666-4114FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Theatrical Teamster Local 817Occupation (for Individual)
Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2016

Transaction ID : VNVZMEZPAH7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fortier, Robert, , ,

Mailing Address 844 2nd Crown Point Rd

City
StraffordState
NHZip Code
03884-6210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U SystemsOccupation (for Individual)
IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2016

Transaction ID : VNVZMEZPAG9

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fortier, Robert, , ,

Mailing Address 844 2nd Crown Point Rd

City
StraffordState
NHZip Code
03884-6210FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

U Systems

Occupation (for Individual)

IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2016

Transaction ID : VNVZMEZPTB5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Glass, Valerie, , ,

Mailing Address 16521 Peale Ln

City

Huntington Beach

State

CA

Zip Code

92649-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2016

Transaction ID : VNVZMEZP9Z5

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Golden, Michael, , ,

Mailing Address 125 S Jefferson St
Unit 2506

City

Chicago

State

IL

Zip Code

60661-3733

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASU

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2016

Transaction ID : VNVZMEZH161

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

137.00

TOTAL This Period (last page this line number only).....▶

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hansen, Chris, , ,

Mailing Address 4556 Sprucedale PI

City
BoulderState
COZip Code
80301-1735FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Transaction ID : VNVZMEY3135

Amount of Each Receipt this Period

22.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hansen, Chris, , ,

Mailing Address 4556 Sprucedale PI

City
BoulderState
COZip Code
80301-1735FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016

Transaction ID : VNVZMEZRYX9

Amount of Each Receipt this Period

-22.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kelly, Bryce, , ,

Mailing Address 90 Beechtree Dr

City
LarchmontState
NYZip Code
10538-1202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hudson River Trading

Occupation (for Individual)

Business Operations Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 19 / 2016

Transaction ID : VNVZMF071E9

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

25.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 59

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Litt, Michael, , ,

Mailing Address 13100 SE River Rd

City
Portland

State
OR

Zip Code
97222-8031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2016

Transaction ID : VNVZMEZEQR6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Little, David, , ,

Mailing Address 6350 N Wayne Ave
Apt 104

City
Chicago

State
IL

Zip Code
60660-1335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2016

Transaction ID : VNVZMF07199

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. London, Jacqueline, , ,

Mailing Address 5309 Tuscarawas Rd

City
Bethesda

State
MD

Zip Code
20816-3123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3890.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMEYR8F1

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 59

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Losi, Joseph, A., ,

Mailing Address 1511 11th Ave W

City
SeattleState
WAZip Code
98119-3255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : VNVZMF070R5

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Losi, Joseph, A., ,

Mailing Address 1511 11th Ave W

City
SeattleState
WAZip Code
98119-3255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2016

Transaction ID : VNVZMF070Z0

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McIrvn, Veaney, , ,

Mailing Address 400 Shelton St

City
GreensboroState
NCZip Code
27405-5655FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KPL Global

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2016

Transaction ID : VNVZMF07132

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McIrvine, Veaney, , ,

Mailing Address 400 Shelton St

City
Greensboro

State
NC

Zip Code
27405-5655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KPL Global

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2016

Transaction ID : VNVZMF07096

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Jason, , ,

Mailing Address 16072 NW Hildago Ln

City
Portland

State
OR

Zip Code
97229-1146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Intel

Occupation (for Individual)
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2016

Transaction ID : VNVZMEZEQS4

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morris, Greg, , ,

Mailing Address 151 W 74th St

City
New York

State
NY

Zip Code
10023-2202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Google

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : VNVZMF071R8

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shah, Parthiv, , ,

Mailing Address 74 King St

City
EdisonState
NJZip Code
08820-1002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2016

Transaction ID : VNVZMEZPAC8

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sheppard, Elizabeth, , ,

Mailing Address 2007 SE Bybee Blvd

City
PortlandState
ORZip Code
97202-5734FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : VNVZMF071X7

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Silbar, Richard, , ,

Mailing Address 168 Dos Brazos St

City
Los AlamosState
NMZip Code
87544-2431FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Physicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2016

Transaction ID : VNVZMEZPA45

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

64.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tabor, Alan, , ,

Mailing Address 315 28th St

City

San Francisco

State

CA

Zip Code

94131-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Analyst/Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2016

Transaction ID : VNVZMF071V1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tabor, Alan, , ,

Mailing Address 315 28th St

City

San Francisco

State

CA

Zip Code

94131-2308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Analyst/Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2016

Transaction ID : VNVZMF071M6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vaughan, Virginia, , ,

Mailing Address 5 Anderson Rd

City

Clinton

State

NY

Zip Code

13323-1201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

397.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : VNVZMF07227

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 59
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vaughan, Virginia, , ,

Mailing Address 5 Anderson Rd

City
Clinton

State
NY

Zip Code
13323-1201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2016

Transaction ID : VNVZMF071J0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.00

1444.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2016					

FEC Identification Number

C

Transaction ID : VNV0C9TXC1

Amount of Each Disbursement this Period

 15.96☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			03			2016					

FEC Identification Number

C

Transaction ID : VNV0C9TZ7S

Amount of Each Disbursement this Period

 45.73☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			10			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V07C

Amount of Each Disbursement this Period

 33.20☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 94.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		14		2016

FEC Identification Number

C

Transaction ID : VNV0C9V0W

Amount of Each Disbursement this Period

9.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		17		2016

FEC Identification Number

C

Transaction ID : VNV0C9V1N3

Amount of Each Disbursement this Period

32.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		21		2016

FEC Identification Number

C

Transaction ID : VNV0C9V1X

Amount of Each Disbursement this Period

10.45

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

53.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	8		2	0	1	6		

FEC Identification Number

C**Transaction ID : VNV0C9V2S6**

Amount of Each Disbursement this Period

8.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	8		2	0	1	6		

FEC Identification Number

C**Transaction ID : VNV0C9V3V9**

Amount of Each Disbursement this Period

1.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Administrative Business Services, LLC

Mailing Address 10205 Atkins Ridge Dr

City
CharlotteState
NCZip Code
28213-4290Purpose of Disbursement
Administrative Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	7		2	0	1	6		

FEC Identification Number

C**Transaction ID : VNV0C9V2F5**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

509.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

PAGE 24 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V2HF

Amount of Each Disbursement this Period

157.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V6ZB

Amount of Each Disbursement this Period

189.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BuzzMaker US, LLC

Mailing Address 322 Shepherd St NW

City
WashingtonState
DCZip Code
20011-4812Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V2F1

Amount of Each Disbursement this Period

4172.15

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4519.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Caplin & Drysdale, CharteredMailing Address 1 Thomas Cir NW
Ste 1100City
WashingtonState
DCZip Code
20005-5812Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2FZ**

Amount of Each Disbursement this Period

885.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CloudFlareMailing Address 665 3rd St
Ste 200City
San FranciscoState
CAZip Code
94107-1985Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		15		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2HS**

Amount of Each Disbursement this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DC Health LinkMailing Address 1225 I St NW
FI 4City
WashingtonState
DCZip Code
20005-3914Purpose of Disbursement
Health Insurance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		07		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2G**

Amount of Each Disbursement this Period

2607.01

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3522.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Democracy Spring

Mailing Address 2950 E 29th St

City
OaklandState
CAZip Code
94601-2731Purpose of Disbursement
GOTV Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			07			2016					

FEC Identification Number

C**Transaction ID : VNV0C9V6NF**

Amount of Each Disbursement this Period

5319.48

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Drones Made EasyMailing Address 5390 Napa St
Ste BCity
San DiegoState
CAZip Code
92110-2616Purpose of Disbursement
Event Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			21			2016					

FEC Identification Number

C**Transaction ID : VNV0C9TX9Q**

Amount of Each Disbursement this Period

330.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Evans & Katz, LLC

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013-0357Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			07			2016					

FEC Identification Number

C**Transaction ID : VNV0C9V2G**

Amount of Each Disbursement this Period

1578.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7228.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Expert Drones

Mailing Address 217 King St

City
AlexandriaState
VAZip Code
22314-3290Purpose of Disbursement
Event Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			21			2016					

FEC Identification Number

C

Transaction ID : VNV0C9TX9N

Amount of Each Disbursement this Period

 3579.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V6ZN

Amount of Each Disbursement this Period

 165.70☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			03			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V6ZI

Amount of Each Disbursement this Period

 19.86☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 3764.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Green Dot Bank

Mailing Address 3465 E Foothill Blvd

City
PasadenaState
CAZip Code
91107-6071Purpose of Disbursement
Prepaid Debit Card

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2016

FEC Identification Number

C

Transaction ID : VNV0C9V6NE

Amount of Each Disbursement this Period

1180.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heroku

Mailing Address 650 7th St

City
San FranciscoState
CAZip Code
94103-4911Purpose of Disbursement
Telecommunication Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2016

FEC Identification Number

C

Transaction ID : VNV0C9V2HV

Amount of Each Disbursement this Period

95.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hustle, Inc.Mailing Address 251 Kearny St
Ste 300City
San FranciscoState
CAZip Code
94108-4544Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2016

FEC Identification Number

C

Transaction ID : VNV0C9V2G!

Amount of Each Disbursement this Period

600.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1875.93

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Intuit

Mailing Address 2632 Marine Way

City
Mountain ViewState
CAZip Code
94043-1126Purpose of Disbursement
Accounting Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		14		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2H**

Amount of Each Disbursement this Period

26.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LyftMailing Address 548 Market St
68514City
San FranciscoState
CAZip Code
94104-5401Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2HY**

Amount of Each Disbursement this Period

9.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NationBuilderMailing Address 448 S Hill St
200City
Los AngelesState
CAZip Code
90013-1155Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2H**

Amount of Each Disbursement this Period

679.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

714.38

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. NationBuilderMailing Address 448 S Hill St
200City
Los AngelesState
CAZip Code
90013-1155Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2016

FEC Identification Number

C**Transaction ID : VNV0C9V5EF**

Amount of Each Disbursement this Period

659.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc.Mailing Address 1101 15th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Database Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2016

FEC Identification Number

C**Transaction ID : VNV0C9V2HK**

Amount of Each Disbursement this Period

1125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PaychexMailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C**Transaction ID : VNV0C9V6Zl**

Amount of Each Disbursement this Period

866.73

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2650.73

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VNV0C9V6ZJ**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VNV0C9V6ZK**

Amount of Each Disbursement this Period

82.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2016

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VNV0C9V6ZI**

Amount of Each Disbursement this Period

328.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

560.57

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	5		2	0	1	6		

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VNV0C9V6ZE

Amount of Each Disbursement this Period

866.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paychex

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	5		2	0	1	6		

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VNV0C9V6ZF

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paychex

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	5		2	0	1	6		

Mailing Address 3420 Executive Center Dr
Ste 310City
AustinState
TXZip Code
78731-1626Purpose of Disbursement
Payroll Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VNV0C9V6ZI

Amount of Each Disbursement this Period

82.40

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1099.13

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 N 1st St

City
San JoseState
CAZip Code
95131-2021Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		28		2016

FEC Identification Number

C

Transaction ID : VNV0C9V5G

Amount of Each Disbursement this Period

 18.67☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ramada Conference Center

Mailing Address 542 U.S. 9

City
FishkillState
NYZip Code
12524Purpose of Disbursement
Conference Room Rental

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2016

FEC Identification Number

C

Transaction ID : VNV0C9V2J0

Amount of Each Disbursement this Period

 249.58☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Signs.com

Mailing Address 1550 S Gladiola St

City
Salt Lake CityState
UTZip Code
84104-6506Purpose of Disbursement
Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		03		2016

FEC Identification Number

C

Transaction ID : VNV0C9V5E1

Amount of Each Disbursement this Period

 132.96☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 401.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Signs.com

Mailing Address 1550 S Gladiola St

City
Salt Lake CityState
UTZip Code
84104-6506Purpose of Disbursement
Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V5EJ

Amount of Each Disbursement this Period

140.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Singer, Benjamin, , ,

Mailing Address 757 Lincoln Pl

City
BrooklynState
NYZip Code
11216-4209Purpose of Disbursement
Reimb: Telecom Services, Travel, Meals, Computer Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V00E

Amount of Each Disbursement this Period

2835.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 50 Massachusetts Ave NE

City
WashingtonState
DCZip Code
20002-4214Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2016			

FEC Identification Number

C

Transaction ID : VNV0C9V00I

Amount of Each Disbursement this Period

200.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2976.63

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. FedEx Office

Mailing Address 187 Dartmouth St

City
BostonState
MAZip Code
02116-3502Purpose of Disbursement
Printing and Supplies

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V00T

Amount of Each Disbursement this Period

104.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LyftMailing Address 548 Market St
68514City
San FranciscoState
CAZip Code
94104-5401Purpose of Disbursement
Travel

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V00H

Amount of Each Disbursement this Period

464.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address PO Box 36647-1CR

City
DallasState
TXZip Code
75235Purpose of Disbursement
Travel

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			27			2016					

FEC Identification Number

C

Transaction ID : VNV0C9V00C

Amount of Each Disbursement this Period

1527.35

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. T-Mobile

Mailing Address PO Box 742596

City
CincinnatiState
OHZip Code
45274-2596Purpose of Disbursement
Telecommunication Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

Transaction ID : VNV0C9V00F

Amount of Each Disbursement this Period

311.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Singer, Benjamin, , ,

Mailing Address 757 Lincoln Pl

City
BrooklynState
NYZip Code
11216-4209Purpose of Disbursement
Reimb: Equipment and Meals

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

Transaction ID : VNV0C9V00W

Amount of Each Disbursement this Period

955.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Infinite Loop

City
CupertinoState
CAZip Code
95014-2083Purpose of Disbursement
Computer Supplies

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2016

FEC Identification Number

C

Transaction ID : VNV0C9V000

Amount of Each Disbursement this Period

808.15

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

955.92

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Singer, Benjamin, , ,

Mailing Address 757 Lincoln Pl

City
BrooklynState
NYZip Code
11216-4209Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C**Transaction ID : VNV0C9V17C**

Amount of Each Disbursement this Period

1283.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Singer, Benjamin, , ,

Mailing Address 757 Lincoln Pl

City
BrooklynState
NYZip Code
11216-4209Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2016

FEC Identification Number

C**Transaction ID : VNV0C9V17R**

Amount of Each Disbursement this Period

816.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. StripeMailing Address 3180 18th St
Ste 100City
San FranciscoState
CAZip Code
94110-2043Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2016

FEC Identification Number

C**Transaction ID : VNV0C9V5G:**

Amount of Each Disbursement this Period

35.34

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2134.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 59

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Stripe

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2016

Mailing Address 3180 18th St
Ste 100City
San FranciscoState
CAZip Code
94110-2043Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : VNV0C9V5G1**

Amount of Each Disbursement this Period

10.41

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. UserVoice

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Mailing Address 121 2nd St
FI 4City
San FranciscoState
CAZip Code
94105-3611Purpose of Disbursement
Telecommunication Services

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : VNV0C9V2J2I**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. UserVoice

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2016

Mailing Address 121 2nd St
FI 4City
San FranciscoState
CAZip Code
94105-3611Purpose of Disbursement
Telecommunication Services

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : VNV0C9V6ZJ**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

50.41

TOTAL This Period (last page this line number only).....▶

33111.13

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 59

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mayday PAC

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Online Advertising Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		07		2016

FEC Identification Number

C

Transaction ID : VNV0C9V6NE

Amount of Each Disbursement this Period

 230.82☐ Memo Item

Full Name (Last, First, Middle Initial)

B. South Dakotans for IntegrityMailing Address 7001 S Lyncrest Pl
Ste 200City
Sioux FallsState
SDZip Code
57108-2599Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		03		2016

FEC Identification Number

C

Transaction ID : VNV0C9V2J3I

Amount of Each Disbursement this Period

 1000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

 1230.82 1230.82

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 OF 59

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mayday PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bumperactive

Nature of Debt (Purpose):
Postage

Mailing Address 5925 Burnet Rd

City
AustinState
TXZip Code
78757-3224

Outstanding Balance Beginning This Period

0.00

Transaction ID : VNS1W9H7Q46

Amount Incurred This Period

423.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

423.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BuzzMaker US, LLC

Nature of Debt (Purpose):
Auto-calls and Online Advertising Services

Mailing Address 322 Shepherd St NW

City
WashingtonState
DCZip Code
20011-4812

Outstanding Balance Beginning This Period

806.92

Transaction ID : VNS1W9H7J38

Amount Incurred This Period

0.00

Payment This Period

806.92

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Google

Nature of Debt (Purpose):
Online Advertising Services

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351

Outstanding Balance Beginning This Period

0.00

Transaction ID : VNS1W9H7Q70

Amount Incurred This Period

452.46

Payment This Period

0.00

Outstanding Balance at Close of This Period

452.46

1) **SUBTOTALS** This Period This Page (optional)..... ►

876.07

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 OF 59

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mayday PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Singer, Benjamin, , ,

Nature of Debt (Purpose):

Reimbursement for Telecommunication
Services, Travel and Supplies

Mailing Address 757 Lincoln Pl

City
BrooklynState
NYZip Code
11216-4209

Outstanding Balance Beginning This Period

2835.95

Transaction ID : VNS1W9H7JJ5

Amount Incurred This Period

0.00

Payment This Period

2835.95

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

876.07

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

876.07

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 59
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee BuzzMaker US, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 322 Shepherd St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
City Washington		State DC	Zip Code 20011-4812		
Purpose of Expenditure Autocalls		Category/ Type 006		Amount 298.32	
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee BuzzMaker US, LLC			<input type="checkbox"/> Memo Item		
Mailing Address 322 Shepherd St NW			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016		
City Washington		State DC	Zip Code 20011-4812		
Purpose of Expenditure Online Advertising Services		Category/ Type 004		Amount 508.60	
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			806.92		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 43 OF 59
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee BuzzMaker US, LLC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 322 Shepherd St NW					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City Washington		State DC	Zip Code 20011-4812		Amount 500.00
Purpose of Expenditure Online Advertising Services			Category/ Type 004		Transaction ID : VNV0C9TXN44
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Date of Disbursement or Obligation
			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Calendar Year-To-Date Per Election for Office Sought			14212.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee BuzzMaker US, LLC			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 322 Shepherd St NW					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
City Washington		State DC	Zip Code 20011-4812		Amount 500.00
Purpose of Expenditure Online Advertising Services			Category/ Type 004		Transaction ID : VNV0C9TXN51
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Date of Disbursement or Obligation
			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>
Calendar Year-To-Date Per Election for Office Sought			14212.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					1000.00
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,			[Electronically Filed]		Date
Signature					<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div></div> <div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00562587 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item BuzzMaker US, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016	
Mailing Address 322 Shepherd St NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.00</div>	
City Washington	State DC	Zip Code 20011-4812	Transaction ID : VNV0C9TZ928 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2016	
Purpose of Expenditure Online Advertising Services		Category/ Type 004		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item BuzzMaker US, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Mailing Address 322 Shepherd St NW			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">250.00</div>	
City Washington	State DC	Zip Code 20011-4812	Transaction ID : VNV0C9V2FX8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Purpose of Expenditure Online Advertising Services		Category/ Type 004		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">750.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Singer, Benjamin, , ,</u>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item BuzzMaker US, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Mailing Address 322 Shepherd St NW			Amount 250.00	
City Washington	State DC	Zip Code 20011-4812	Transaction ID : VNV0C9V2FY6 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Purpose of Expenditure Online Advertising Services		Category/ Type 004		
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: WI	
Calendar Year-To-Date Per Election for Office Sought 2830.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Facebook Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016	
Mailing Address 1601 Willow Rd			Amount 67.17	
City Menlo Park	State CA	Zip Code 94025-1452	Transaction ID : VNV0C9TYH34 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016	
Purpose of Expenditure Online Advertising Services		Category/ Type 004		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President <input type="checkbox"/> State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			317.17	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Singer, Benjamin, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee FedEx Office			<input type="checkbox"/> Memo Item		
Mailing Address 187 Dartmouth St			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
City Boston	State MA	Zip Code 02116-3502	Amount 113.63		
Purpose of Expenditure Printing - Event Banners		Category/Type 007	Transaction ID : VNV0C9TX7P8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee GoDaddy			<input type="checkbox"/> Memo Item		
Mailing Address 14455 N Hayden Rd Ste 219			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
City Scottsdale	State AZ	Zip Code 85260-6993	Amount 87.38		
Purpose of Expenditure Website Services		Category/Type 006	Transaction ID : VNV0C9TYH42 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			201.01		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Signature					

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee GoDaddy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 14455 N Hayden Rd Ste 219			Amount 36.51		
City Scottsdale	State AZ	Zip Code 85260-6993	Transaction ID : VNV0C9TYH50		
Purpose of Expenditure Website Services		Category/Type 006	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Google			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 1600 Amphitheatre Pkwy			Amount 3142.18		
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV0C9TYG59		
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/2/16 24 hour report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			3178.69		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , , Signature			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00562587 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Google			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 1600 Amphitheatre Pkwy			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1000.00</div>	
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV0C9TYH76 Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2016	
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/2/16 24 hour report		Category/Type 004		
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought 2830.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input type="checkbox"/> Memo Item Google			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 1600 Amphitheatre Pkwy			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">258.25</div>	
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV0C9TZ8Z5 Date of Disbursement or Obligation MM / DD / YYYY 11 / 07 / 2016	
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/4/16 24 hour report		Category/Type 004		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1258.25</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Singer, Benjamin, , ,</u>			Date MM / DD / YYYY 12 / 08 / 2016	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Google <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016	
Mailing Address 1600 Amphitheatre Pkwy			Amount 1650.00	
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV0C9TYG67	
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/2/16 24 hour report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2016	
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Google <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016	
Mailing Address 1600 Amphitheatre Pkwy			Amount 1080.11	
City Mountain View	State CA	Zip Code 94043-1351	Transaction ID : VNV0C9TZ903	
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/4/16 24 hour report		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 08 / 2016	
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought 2830.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			2730.11	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Singer, Benjamin, , , Signature			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

[Electronically Filed]

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Google			<input type="checkbox"/> Memo Item		
Mailing Address 1600 Amphitheatre Pkwy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016		
City Mountain View		State CA	Zip Code 94043-1351		
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/4/16 24 hour report			Category/Type 004		
Name of Federal Candidate: KANDER, JASON, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			2257.10 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee Google			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1600 Amphitheatre Pkwy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016		
City Mountain View		State CA	Zip Code 94043-1351		
Purpose of Expenditure Actual Cost for Online Advertising Services as disclosed on 11/4/16 24 hour report			Category/Type 004		
Name of Federal Candidate: KANDER, JASON, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought			2257.10 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures			1638.64		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Green Dot Bank <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address 3465 E Foothill Blvd			Amount 1019.42		
City Pasadena	State CA	Zip Code 91107-6071	Transaction ID : VNV0C9TW4J1		
Purpose of Expenditure Prepaid Debit Card		Category/ Type 007	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee McCreate <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016		
Mailing Address 1405 McDaniels Ave			Amount 167.00		
City Highland Park	State IL	Zip Code 60035-3648	Transaction ID : VNV0C9TZ8X9		
Purpose of Expenditure Design Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2016		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			1186.42		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y		
Full Name of Payee MoCreate <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016		
Mailing Address 1405 McDaniels Ave			Amount 166.00		
City Highland Park	State IL	Zip Code 60035-3648	Transaction ID : VNV0C9TZ8Y7		
Purpose of Expenditure Design Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2016		
Name of Federal Candidate: KANDER, JASON, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: MO		
Calendar Year-To-Date Per Election for Office Sought 2257.10			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Monument Optimization <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 3726 Connecticut Ave NW Apt 409			Amount 500.00		
City Washington	State DC	Zip Code 20008-4547	Transaction ID : VNV0C9TYF30		
Purpose of Expenditure Online Advertising Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			666.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , , Signature			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee Monument Optimization			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 3726 Connecticut Ave NW Apt 409			Amount 500.00		
City Washington	State DC	Zip Code 20008-4547	Transaction ID : VNV0C9TYF48		
Purpose of Expenditure Online Advertising Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 11 / 03 / 2016		
Name of Federal Candidate: TEACHOUT, ZEPHYR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President <input type="checkbox"/> State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Monument Optimization			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 3726 Connecticut Ave NW Apt 409			Amount 500.00		
City Washington	State DC	Zip Code 20008-4547	Transaction ID : VNV0C9TYH68		
Purpose of Expenditure Online Advertising Services		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 11 / 03 / 2016		
Name of Federal Candidate: FEINGOLD, RUSSELL DANA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: WI <input type="checkbox"/> President <input type="checkbox"/> State:		
Calendar Year-To-Date Per Election for Office Sought 2830.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			1000.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 12 / 08 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Parker-Spitzer, Christine, , ,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address 1307 Saint Johns Pl Apt 2B			Amount 250.00		
City Brooklyn	State NY	Zip Code 11213-3766	Transaction ID : VNV0C9TWKR0		
Purpose of Expenditure Organizing Fellowship 10/27/16-11/8/16		Category/ Type 007	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Pezzella, Richard, , ,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address 2170 Brigham St Apt 1H			Amount 150.00		
City Brooklyn	State NY	Zip Code 11229-5638	Transaction ID : VNV0C9TWKM9		
Purpose of Expenditure Organizing Fellowship 10/27/16-11/8/16		Category/ Type 007	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			400.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Pezzella, Richard, , ,			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address 2170 Brigham St Apt 1H			Amount 150.00		
City Brooklyn	State NY	Zip Code 11229-5638	Transaction ID : VNV0C9TXEM5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 28 / 2016		
Purpose of Expenditure Organizing Fellowship 10/27/16-11/8/16		Category/ Type 001			
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Raining Colors LLC			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 156 5th Ave Ph 2			Amount 1000.00		
City New York	State NY	Zip Code 10010-7734	Transaction ID : VNV0C9TYEY1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2016		
Purpose of Expenditure Website Services		Category/ Type 006			
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			1150.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Signs.com			<input type="checkbox"/> Memo Item		
Mailing Address 1550 S Gladiola St			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
City Salt Lake City	State UT	Zip Code 84104-6506	Amount 289.01		
Purpose of Expenditure Printing - Event Banners		Category/ Type 007	Transaction ID : VNV0C9TVY14 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Signs.com			<input type="checkbox"/> Memo Item		
Mailing Address 1550 S Gladiola St			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
City Salt Lake City	State UT	Zip Code 84104-6506	Amount 91.16		
Purpose of Expenditure Printing - Event Banners		Category/ Type 007	Transaction ID : VNV0C9TVY30 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2016		
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			380.17		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Singer, Benjamin, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC				FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Signs.com			<input type="checkbox"/> Memo Item		
Mailing Address 1550 S Gladiola St			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
City Salt Lake City		State UT	Zip Code 84104-6506		Amount 33.09
Purpose of Expenditure Shipping - Event Banners			Category/Type 007		Transaction ID : VNV0C9TW4C4 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2016
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			14212.32 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Signs.com			<input type="checkbox"/> Memo Item		
Mailing Address 1550 S Gladiola St			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
City Salt Lake City		State UT	Zip Code 84104-6506		Amount 30.09
Purpose of Expenditure Shipping - Event Banners			Category/Type 007		Transaction ID : VNV0C9TW4D1 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2016
Name of Federal Candidate: FASO, JOHN J. MR., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY		
Calendar Year-To-Date Per Election for Office Sought			14212.32 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures 63.18					
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Singer, Benjamin, , ,</u>			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 59
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item Singer, Benjamin, , ,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Mailing Address 757 Lincoln Pl			Amount 12.95	
City Brooklyn	State NY	Zip Code 11216-4209	Transaction ID : VNV0C9TW4B6	
Purpose of Expenditure Reimb. Prepaid Debit Card; ultimate payee was Duane Reade		Category/Type 007	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item Singer, Benjamin, , ,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Mailing Address 757 Lincoln Pl			Amount 1399.62	
City Brooklyn	State NY	Zip Code 11216-4209	Transaction ID : VNV0C9TX9Z2	
Purpose of Expenditure Salaries		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			1412.57	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Singer, Benjamin, , , Signature			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Mayday PAC			FEC IDENTIFICATION NUMBER ▼ C C00562587	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee <input type="checkbox"/> Memo Item Singer, Benjamin, , ,			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Mailing Address 757 Lincoln PI			Amount 14.86	
City Brooklyn	State NY	Zip Code 11216-4209	Transaction ID : VNV0C9TXEJ0	
Purpose of Expenditure Reimb: Travel; ultimate payee Shell		Category/Type 002	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
Name of Federal Candidate: FASO, JOHN J. MR., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 14212.32			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure		Category/Type 		
Name of Federal Candidate:			Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State: <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			14.86	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures			18153.99	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Singer, Benjamin, , , Signature			Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016	

[Electronically Filed]